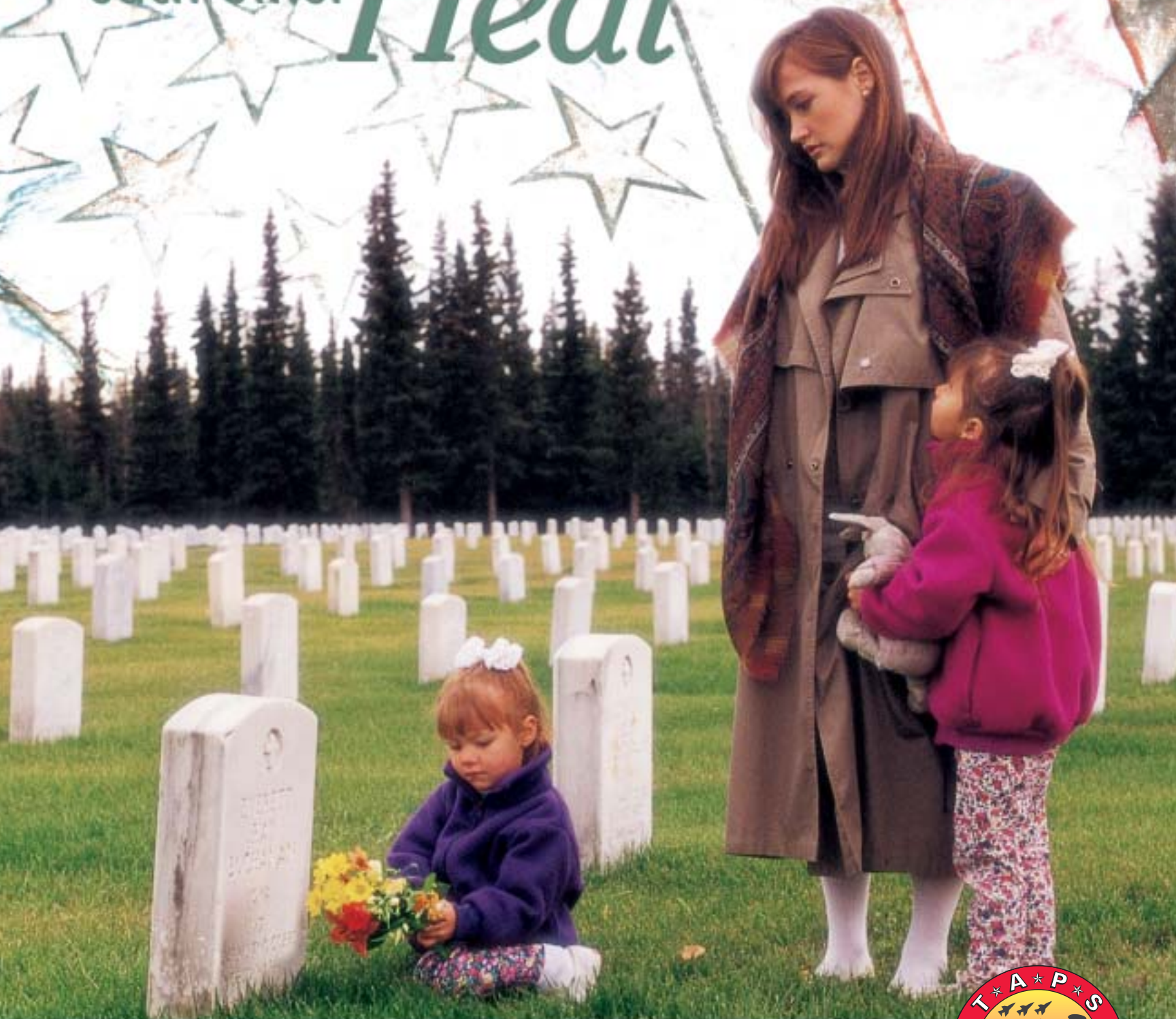


HELPING each other *Heal*



TAPS Survivor Care Package

www.TAPS.org • 800-959-TAPS (8277) • Email: info@taps.org



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The information in this packet is intended to provide general support and assistance. Your personal circumstances may be different. Please seek help and guidance from your casualty officer, religious advisor, financial consultant or mental health counselor for your specific situation.

A LETTER FROM TAPS

Dear Friends,

When my husband was killed in the Army, I became a military widow.

When I found a circle of friends who would love, encourage and understand me because they had been there also, I became a part of the TAPS family.

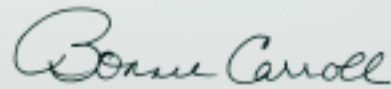
TAPS is America's support group for all those whose lives have been forever changed by the death of a loved one serving in the Armed Forces.

The military has honored your family by providing casualty and mortuary support and ensuring the benefits your loved one earned are there for you.

Now, as former Chairman of the Joint Chiefs John Shalikashvili said, "TAPS does for you what the military can't—they offer compassionate care and comfort as only another survivor can."

We are here for you to provide support, information and resources. You are not alone. Call on us!

With Love and Care,



Bonnie Carroll
TAPS Chairman





TAPS is here for you!

We are so very sorry for the loss that has brought you to the Tragedy Assistance Program for Survivors (TAPS), but grateful you have this booklet and know you have support. We are here for you, and will help you in every way we can. TAPS is a family you are lovingly welcomed into, and we hope you will call on us whenever you need an ear or a hug or a shoulder to lean on!

First, I'd like to tell you a little bit about everything TAPS gently offers for you, 24 hours a day, free of charge. This package includes articles you'll find helpful and an overview of resources available to you. You will also be receiving information from TAPS about our national events, local programs and online support groups. Please call or write us if we can send you more information, answer any questions or provide support in any way.

You are not alone. Each year, hundreds of American families face the tragedy of the death of a loved one serving in the Armed Forces. Our families include parents, siblings, spouses, children and significant others—everyone is lovingly welcome. It is our honor and privilege to care for all those who the service member loved and very sadly left behind.

Losing a loved one in the military poses unique challenges that aren't there for other families after a death. For a spouse living in base housing, you may have to move from your house and leave your job where you had friends who could support you. For a child, you might have to leave your school and start over somewhere new, where they won't know you had an amazing parent in the military. Parents sometimes wonder how a child who was so good, so caring, so selfless that they could serve their country could be taken from them. TAPS siblings say they feel they have lost a part of themselves—as though a piece of their heart is now missing. And for significant others, the future is shattered and the void is immense.

When a service member raises their right hand and swears to "protect and defend the Constitution of the United States," their entire family joins in this dedication to the mission. Now, you are part of a new military family in TAPS, and we will honor your loved one as we care for you. You are not alone.

History of TAPS

The Tragedy Assistance Program for Survivors (TAPS) was founded in the wake of a military tragedy—the deaths of eight soldiers aboard an Army National Guard aircraft in November 1992. In the months and years following the loss of our loved ones, we survivors turned to various grief support organizations for comfort, but it was when we turned to each other for comfort and shared our hopes and fears that we found strength and truly began to heal. We realized that the tragedy we shared—losing a loved one serving in the military—was far different from other types of losses. We shared pride in our loved ones' service to America and tremendous sadness at the ultimate sacrifice our loved ones made.

In talking with each other and people across the country who had also lost loved ones in military service, we realized that gaps existed in support once the official casualty case file was closed. Like so many other peer support groups in America, TAPS was formed to connect you, the survivor, with the only ones who can truly help, those who have been there and speak from the same broken heart and look through the same tear-filled eyes.

Whether you have lost a sibling, significant other, parent, child or spouse, TAPS has peer mentors who are there for you. Because we have been there, we understand. And sometimes, that's what you need most of all, someone who truly understands from the heart because they have felt your pain.



The Hall family appeared on FOX News DaySide with Linda Vester to talk about the importance of the TAPS Good Grief Camp for Young Survivors. Their father, Lt. Kelly Hall, was killed in 1998 while serving in the Army.

"The Tragedy Assistance Program for Survivors is a wonderful story of courage and commitment. When an untimely and tragic event occurs and a service member is lost, the work of TAPS bears quiet testimony that even deep in the pain and tragedy of the loss, members of the military family are ready to step forward, to help shoulder a burden and to help the grieving cope and heal. In its countless contributions, TAPS helps to deliver the triumph of tenderness and kindness over pain, suffering and loss."

—Gen. Colin L. Powell,
Former Secretary of State



We have a wonderful relationship with the Department of Defense and the Department of Veterans Affairs (VA) thanks to the vision and care of former Chairman of the Joint Chiefs John Shalikashvili and former VA Secretary Togo West. In 1997 they took a look at the powerful healing taking place through TAPS and they immediately understood this was something amazing—survivors helping each other heal, doing something no one else could do for us!

Today TAPS is a successful and heralded national Veterans Service Organization dedicated to helping American families rebuild their lives. To date, more than 12,000 survivors have requested support and assistance from the TAPS peer support network. More than 4,000 survivor families and friends have attended the TAPS Annual National Military Survivor Seminar and Good Grief Camp for Young Survivors and have participated in TAPS Chat, an online message board. The success of the TAPS program has been the subject of feature pieces in the *Washington Post*, *USA Today* and the *New York Times*, on FOX News, CBS and CNN, and in numerous national magazines.

TAPS Services for Survivors

Peer Support

We have a wonderful, loving program to connect you with others who have also suffered the loss of a loved one serving in the Armed Forces, as part of the TAPS national survivor network. Together, we share our pain and fears in a safe and supportive environment, and help each other heal. Let us know if you would like to receive a call from someone who will then be there for you in the coming weeks and months. Just a friend who will truly understand, offer comfort and information, but most of all, lend an ear to listen and a shoulder to lean on.

Crisis Intervention

You now have a number to call, anytime of the day or night, for help and information. We have a wonderful network of trained crisis response professionals on call in each state 24 hours a day through **1-800-959-TAPS (8277)**.

Grief and Trauma Information and Resources

TAPS is a member of the Association of Death Education and Counseling and the International Society for Traumatic Stress Studies, and is able to offer information about bereavement support groups throughout the nation. TAPS also partners with the Department of Veterans Affairs Readjustment Counseling Service and its more than 200 Vet Centers around the country. These are wonderful professionals who are not only therapists and counselors,

but are also, in many cases, combat veterans themselves. They get it! And they are here for you now to offer counseling and support. This counseling is free of charge to you, so call us if you would like your local Vet Center counselor to contact you. We'll make it happen.

Casework Assistance

If you have questions about anything at all—from benefits to burial to resources—TAPS can help you find the answers. We understand how hard making these calls can be! TAPS has experienced, empathetic caseworkers who act as liaisons, assisting family members with their needs. Working hand in hand with the appropriate federal, state and private agencies, our caseworkers have been successful in helping find solutions to problems that arise long after the official file has been closed. Calling us is a good starting point for your questions. We can either tell you how to find the answers, or we can do this for you.

Financial planning is an area that has been difficult for survivors. While TAPS does not provide specific financial advice, we work closely with such organizations as the Armed Forces Services Corporation, Army and Air Force Mutual Aid and Navy Mutual Aid to provide specific case assistance and offer secure options for survivors.



Annual National Military Survivor Seminar

For five days during Memorial Day weekend in Washington, D.C., we help each other heal by celebrating the life we lost and by remembering the love that remains. It is an extraordinary opportunity to hear firsthand what other military survivors have experienced and to participate in workshops for healing and other special events.

Good Grief Camp for Young Survivors

As part of our Annual National Military Survivor Seminar, our Good Grief Camp is America's only program of its kind for children who have lost a parent, sibling or loved one in military service. We've gathered some of the Nation's best children's grief and trauma experts to help your children share, heal and have fun in a caring environment.

Youth Program

TAPS is the leading organization in America providing emotional support services to the children of Armed Forces members who have died while serving their country. The TAPS Youth Program gives young people a solid foundation on which to build a healthy future following a tragic loss. The average American doesn't understand the immense sacrifices that military families make for our country. Being a military family requires special people and dedication. When a parent in that family dies, the children deserve the very best care possible. These surviving youth learn coping skills and will understand that the feelings they are experiencing are normal reactions to an abnormal event—the untimely death of a parent or other family member.

TAPS Web Site

TAPS is dedicated to providing up-to-the-minute grief and trauma materials to assist the military survivor on the road to recovery. The TAPS Web site, www.TAPS.org, is a place where you can find resource materials, register for our survivor seminars, read stories from other military survivors and chat with our support group.

TAPS Online Community

Join us online for our national support group meetings held at www.TAPS.org. (Click on TAPS Chat to sign up.)

T★A★P★S

T★A★P★S is the official magazine of the Tragedy Assistance Program for Survivors and is available free of charge to all military survivors, military personnel, private sector grief and trauma professionals, and interested individuals. Each issue includes compelling articles written by military survivors at all stages of recovery who express their own stories of personal tragedy and recovery.

“I needed something that was going to help me heal. And this was exactly what I was looking for. This was the organization that was about coming together, meeting other people who have loved and lost a fallen military person and were coming together and healing through helping each other and looking into the eyes of another person and knowing they know exactly what you're going through and you don't have to explain it.”

*—Joanna Wroblewski
(TAPS Widow)*



General Information on Benefits: Compensation of Survivors of U.S. Military Personnel

Servicemen's Group Life Insurance (SGLI)

Service members are automatically insured for \$400,000* through the SGLI program, but may reduce or decline coverage as desired. Although participating members must pay premiums, SGLI is a government-sponsored insurance program that enables U.S. Service members to increase substantially the amount available to their beneficiaries in the event of their death. Maintaining updated information on SGLI and Record of Emergency Data (DD 93) forms are extremely important in ensuring prompt financial assistance.

- Without SGLI, many members could not obtain life insurance because of their age or military assignments. Some private plans may not insure persons in high-risk groups or may not pay for combat-related death. SGLI has one affordable premium rate for all Service members, giving them an opportunity to provide for their survivors in the event of their death.
- Costs traceable to the extra hazard of duty in the uniformed services are paid by the Military Departments whenever death rates exceed normal peacetime death rates as determined by the Secretary of Veterans Affairs. Retirees may retain their SGLI level of coverage or less under the Veterans Group Life Insurance (VGLI) program.

Death Gratuity

A \$100,000* tax-exempt death gratuity provides immediate financial support to meet the needs of the next of kin.

Basic Allowance for Housing (BAH)

Eligible family members occupying government housing on the date the member dies may continue to occupy such housing without charge for a period of 365 days. If they vacate the government housing before the 365 days are up, the BAH is paid lump sum by DFAS for the remaining unused days. If the family members are not occupying government housing, they may receive BAH for 365 days after the member's death paid lump sum by DFAS.

Burial Costs

The Government reimburses a portion* of expenses for the member's burial, depending on the type of arrangements, and will provide travel for next of kin under invitational travel orders.

Unused Leave

Payment is made to the survivor for all the member's unused accrued leave.

**Go to www.TAPS.org for current updates.*





Dependency and Indemnity Compensation (DIC)

The Department of Veterans Affairs (VA) pays a tax-free monthly amount to an unmarried surviving spouse of a Service member who dies on active duty or from a service-connected disability. The basic spouse DIC is a flat-rate annuity per month.*

- Effective January 1, 2005, VA provides an additional child allowance* for 24 months from date of death.

Uniformed Services Survivor Benefit Plan (SBP)

Eligible spouses and children of Service members may also be entitled to monthly payments under the SBP.

- Effective September 10, 2001, a surviving spouse (children of a member who died on active duty after November 24, 2003, are entitled if there is no surviving spouse or the spouse later dies) of a member who dies on active duty is entitled to the SBP. The annuity is 55 percent of retired pay while under age 62 and 35 percent while age 62 and older. This reduced benefit level increased to 45 percent on April 1, 2006; and will increase to 50 percent on April 1, 2007; and finally, to the full 55 percent on April 1, 2008.
- The retired pay is determined as the benefit that would have been payable to the member had that member been retired on total disability on the date of death. For the surviving spouse of a retired member, the annuity amount while under age 62 is equal to 55 percent of the retired pay. When the spouse is age 62, the benefit is reduced as described above.
- When a member dies on active duty, the spouse may request the SBP benefit for the children and receive the DIC payment in addition. However, the SBP benefit then stops when the children are grown and out of school.
- Surviving spouses may transfer the SBP benefit to children in the case of remarriage before age 55.

VA Education Benefits

The surviving spouse and dependent(s) may also qualify for up to 45 months of full-time education benefits from VA. Review qualifying criteria to determine entitlement.

**Go to www.TAPS.org for current updates.*

Social Security

Death benefits are provided for a spouse caring for the member's dependent children under age 16, a surviving spouse during old age, and for eligible minor children of an insured Service member. Benefits depend on the family status of the deceased member, and are the same as for the family of any deceased civilian worker insured under the same circumstances.

- Monthly entitlement is a percentage of the deceased member's "Primary Insurance Amount (PIA)." The full PIA is paid to a surviving spouse who begins payments at age 65. Reduced amounts are payable as early as age 60.
- The mother's/father's and children's benefit is 75 percent of the PIA, subject to a family maximum. Retired members qualify to the extent they had covered wages during their uniformed service.

Health Care

An unremarried surviving spouse and minor dependents of the member are eligible for active duty TRICARE Prime for three years. At the end of three years, the surviving unremarried spouse transfers to the retired benefit. All children will continue to receive the active duty TRICARE Prime benefit until they reach age 21 or 23 if enrolled in college. Dental insurance coverage is extended premium-free for three years after the member's death if survivors were enrolled prior to the death or under age four.

Families of retired members retain their medical coverage so long as a spouse has not remarried. Remarried surviving spouses who lose their TRICARE benefit may transfer to CHAMPVA if that marriage ends or the spouse is age 55.

TRICARE is a second-payer to MEDICARE for all retired beneficiaries with the purchase of MEDICARE Part B. Disabled surviving spouses under age 65 are not required to purchase MEDICARE Part B during their three year active duty TRICARE Prime benefit. There are some costs when the service is not a covered service by both programs.

"My PaPa died in a plane crash. I remember that morning, I was sleeping and then my mom screamed. When I went into her room she told me an Air Force plane went down and my PaPa was flying that day. Later my mom told me that PaPa was dead. I don't like remembering it, but my mom says it's OK to cry. It has been a long time now and I'm doing really well. Going to the TAPS Kids Camp helped me a lot. It helped because all the kids had lost a mom or a dad too. It wasn't embarrassing to cry and if I was sad everyone understood why. I used to just keep everything inside, but at the TAPS Kids Camp, it exploded. That was OK because everyone understood. Since then I have been feeling a lot better. I still miss my PaPa, though. Thanks for everything TAPS!"

—Rachel Thomas

Commissary and Exchange Privileges

The unremarried surviving spouse and qualified unremarried dependents are eligible to shop at military commissaries and exchanges, providing a savings over similar goods sold in private commercial establishments. Families of retired members retain their privileges so long as a spouse is not remarried.

Tax Benefits

The next-of-kin of a Service member whose death occurs overseas in a terrorist or military action is exempt from paying the decedent's income tax for at least the year in which the death occurred. Payments made by VA are tax-exempt. The Death Gratuity and life insurance are tax exempt.

What People are Saying about TAPS

"During these extraordinary times, we have been reminded that our achievements in peace and war have been built on the service and sacrifice of our men and women in uniform. Your loved ones fought for America, not just to the defense of our country, but to the character of our nation. Their patriotism, selfless dedication and determination are an inspiration to us all."

—George W. Bush, 43rd President of the United States

"I am so glad that there is a wonderful program like TAPS to provide support for the loved ones that those brave service members have left behind."

—Nancy Reagan, Former First Lady

"TAPS is the first organization to provide a support network for families facing the loss of a military member. This wonderful program turns compassion into action, and action into help and healing. It is an exceptional example of a partnership between the private sector and government, and it deserves all of our support."

—Ted Stevens, United States Senator

"Through the TAPS services, we not only honor the legacy of the fallen, but also remind younger generations of the values that have made the United States the greatest nation in the world. We must remember that some gave all to protect our freedom. We must honor their legacy and help cushion the burden that falls upon friends and family left behind."

—John Warner, United States Senator

"TAPS has done much good and has made great strides in its 10 years of existence. Since 1994, TAPS has provided support to the families and friends of the hundreds of soldiers, sailors, airmen and marines who die every year in service to our country. The services TAPS provides are needed and welcomed by the survivors of those who have given so much."

—Anthony J. Principi, Former Secretary of Veterans Affairs

"One of the most important aspects of TAPS is the peer mentoring program. I have met a lot of wonderful people that I know I can call at any time, and they will be there for me, and we can talk about so many things and share experiences - and those experiences give me so much hope."

—Yolanda Acevedo
(TAPS Widow)





Helping Adults Cope

Sudden Traumatic Loss

What is a sudden traumatic loss?

Few things in life are as painful as the sudden, traumatic death of a loved one, friend, co-worker or neighbor. Causes of such losses include war, combat, disasters and terrorism, as well as medical catastrophes, airplane crashes, suicide and homicide. In some of these situations, multiple traumatic losses occur. Each of these affects individuals, as well as their communities.

Sudden traumatic deaths can include: (1) deaths that occur without warning, providing no opportunity to anticipate, prepare or say goodbye; (2) deaths that are otherwise untimely, including the death of one's child at any age; (3) deaths that occur as the result of violence and deaths that result in violent harm to the body; (4) deaths of more than one person; and (5) deaths that occur as a result of the willful misconduct of others, carelessness or negligence. Many individuals experience the sudden traumatic loss of a loved one at some point in their lives. And some communities share these traumatic losses. In each case, many additional losses accompany this experience.

What symptoms are typical following a sudden traumatic loss?

The range of people's reactions can vary a great deal from person to person and from culture to culture. Survivors often experience reactions that may include two kinds of symptoms—trauma symptoms and grief symptoms—which sometimes can overwhelm their capacity to cope.

Trauma symptoms may include feelings of horror and anxiety on the one hand and emotional numbness and a sense of disconnection on the other. Some people cannot remember significant parts of what happened, while others are plagued by memories or feel as if they are re-experiencing or reliving the event through painful flashbacks. Traumatic deaths often cause extreme distress over an extended period of time that can significantly interfere with daily functioning.

Many people develop symptoms of a psychological condition called post-traumatic stress disorder (PTSD). There are three groups of symptoms that indicate PTSD: (1) re-experiencing the traumatic event, as indicated by painful, intrusive thoughts or nightmares about the death; (2) avoidance, as indicated by marked efforts to stay away from activities, places or things related to the loved one's death, and emotional numbing, as indicated by feeling detached from others; and (3) increased arousal, as indicated by difficulty sleeping, irritability, difficulty concentrating and a tendency to become startled easily.

Aside from the typical symptoms of PTSD, surviving loved ones sometimes experience self-blame and guilt. People may imagine ways they could or should have prevented these experiences from occurring or how they could have rescued the person, and they may experience guilt surrounding events prior to the death. Whether someone is present at or far from the site at which others were killed, survivor guilt can be common.

Symptoms of grief involve an overwhelming sense of loss with strong feelings of yearning or longing for the loved one. Survivors may feel a profound sense of emptiness and a sense that a part of them has died. They often speak of generalized pain or heaviness in their chest. They may feel depressed and hopeless about the future. Things that were once important may not seem to matter so much anymore. In addition, they may cry easily, lose interest in eating or experience stomach upset, headaches and feelings of restlessness.

Traumatic losses often threaten the survivor's sense of personal safety, security and ability to trust others. It can take a significant amount of time to accept the reality of sudden traumatic loss. Survivors may know intellectually that their loved one is dead, but find themselves expecting the loved one to walk through the door or call on the telephone. It can be particularly hard to part with the loved one's possessions. It may be especially difficult when a loved one's body is not recovered. Sudden traumatic losses often raise existential and spiritual issues as well, such as difficulty making sense of these losses or feeling betrayed by God.

How long will the feelings last?

Because survivors of a sudden traumatic death must come to terms with the loss of their loved one, as well as the manner in which it occurred and the additional or secondary losses, it can take time for the painful feelings and thoughts to diminish. Traumatic deaths are particularly likely to result in intense and prolonged distress if the death was violent or if the death was brought about deliberately. Following such deaths, it is also common for survivors to agonize about what their loved ones experienced during their final moments of life. Particularly if harm was intended, the survivor must grapple with the realization that others can and will commit malevolent acts. This awareness can result in many reactions. It may provoke intense feelings, including denial, fierce protection of survivors or powerful rage toward those perceived to be responsible. In addition, survivors may be more vulnerable if they witnessed the

death or were also threatened with death. Finally, the death of a child poses unique problems for recovery. People expect to die before their children and so it seems profoundly wrong when a child dies first.

It may also take longer to deal with the loss if the survivor: (1) has previously experienced psychological problems, such as major depression; (2) has experienced previous trauma or traumatic loss, especially if it is similar in some way to the most recent loss; (3) has few friends or relatives who are supportive; or (4) is simultaneously coping with other serious concerns, such as dislocation, major health problems, psychosocial stresses or other losses.

As the initial shock of the death diminishes, there may be intervals when the survivor is able to focus on other issues and not feel the pain of the loss so intensely. Gradually, these intervals will become longer, and there will be good days and bad days. Over time, the proportion of good days to bad days typically increases. However, people can experience setbacks during the process. On a relatively good day, the bereaved person may encounter a reminder of the loved one, and this may cause the reemergence of painful feelings of loss. People often have difficulty dealing with occasions or milestones, such as holidays, birthdays, the anniversary date of the death or other times of meaning.

What can survivors do to help themselves?

Because physical health may be affected by grief, it is important for survivors to try to maintain adequate nutrition, sleep and exercise. It's especially important for individuals with any chronic health problems, such as heart disease, to stay in contact with a physician to ensure proper monitoring of their condition if at all possible. Survivors are often preoccupied by their grief and may be prone to other sorts of mishaps, such as accidents, so extra caution is important. Similarly, it may be more difficult if survivors must make major decisions during the first several months after a loss, since life changes may bring on additional stress.

Most experts recommend that survivors confide in someone about the loss and find a support system. This can be a friend, a clergy person or another person who has experienced similar loss. It may take some time to identify friends who can be good listeners. Not everyone knows what to say or do to be helpful. Some survivors withdraw from social contact because of the possibility of hurtful comments. This is unfortunate, because it can cut people off from interactions that could be healing.

Grieving is a long and difficult process because it involves slowly remembering what happened. Sometimes the memories may seem like more than the survivor can bear. It can be helpful for survivors to learn ways to calm themselves. These might include such things as taking a walk, being with people or participating in a distracting activity. Some survivors find it useful to write or read.

When is it a good idea to seek professional help?

It is important for an individual to know they can ask for help. If they continue to experience frequent or severe trauma symptoms, as described above, for more than several months after the death, and if these reactions interfere with other parts of normal life, such as being able to care for one's children or hold a job, asking for support from a professional can be helpful. In addition, any of the following experiences suggest that professional help may be needed:

- Experiencing intense yearning for the deceased that does not diminish over time

TAPS really just held our hand through the process. They provided us resources that I wasn't aware that were out there, even being a veteran myself."

—Angela Turman
(TAPS Fiancé)



- Struggling with substantial feelings of guilt or uncontrolled rage
- Becoming severely depressed and feeling hopeless about the future
- Harboring persistent suicidal thoughts
- Abusing alcohol or other drugs, or increasingly greater tobacco use

Treatment can help

No matter how long someone has been suffering from the impact of a sudden traumatic loss, comforting and effective treatments are available. It is important for survivors of a sudden traumatic loss to select a therapist who is experienced in treating both trauma and bereavement.

And it is important to feel comfortable with language, cultural considerations and style of expression when choosing a psychotherapist.

A variety of individual psychotherapies and support groups are available. Medication and psychotherapy may be effective with symptoms of both depression and PTSD. In addition, temporary medication may be useful for those who initially experience intense anxiety or the inability to sleep at all.

A family doctor; clergy person; local mental health association; state psychiatric, psychological or social work association; or health insurer may be helpful in providing a referral to a counselor or therapist with experience in treating those who have experienced a sudden traumatic loss.

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Our Grief

Oceans of ink have been spilled on the subjects of love and loss, and it makes sense that the two are so closely linked. The pain of loss is in direct correlation with the love we felt. The more we love, the more keenly we feel the absence of that which we love.

This brief article only skims the surface of the facets and complexities of bereavement. For those who like to read, surf the Web, watch television, take classes, or seek out experts, there are unlimited sources of in-depth information about grief. You could spend a lifetime (and some people have devoted their life work to this subject) working to understand grief and your education would never be complete. In part, grief will never be fully understood because it's a human experience and your personal encounter with it will be a reflection of those things that are exclusively you, the person who died, and your unique relationship with that person. No field of study will ever be able to capture the distinctive and exclusive experience of your grief in this moment.

Despite the reality that your grief experience is going to be unique in many respects, there's at least one universal aspect to it. I have yet to meet anyone who said that bereavement is easy. No one has ever told me that it didn't slow them down or cause them a moment's unease. I've never heard that it was no big deal, unnoticeable or, in the current parlance of youth, "no problem." Bereavement turns everything inside out and upside down. And since there's no way anything can be that completely and utterly disruptive and also "normal" in any sense of the word, we must be going crazy.

Well, yes and no. If crazy means extreme, senseless and outrageous, then yes. Bereavement is all of those things. But if crazy means mentally ill, then no. Grief is not a mental health disorder. I recognize that for the bereaved, that's not necessarily good news. Some of us would absolutely love to be packed off to a nice, cozy little asylum where we didn't have to talk with anyone, interact with anyone, make any decisions or be responsible for ourselves or anyone else. That would be the next best thing to simply not waking up one morning. However, most manifestations of grief, in all their extreme, senseless, outrageous and unpleasant ways, are quite normal. You will certainly feel, behave, talk, think and act in crazy ways, but you're not mentally ill.



Important Note: if physical or mental health challenges were already a part of your life journey, bereavement is likely going to make those worse. Please work with your health care professionals to figure out ways to monitor and cope with your bereavement so as to keep complications to a minimum.

You're not going crazy but grief feels extreme

Grief lasts a long time; much longer than most people expect or are willing to tolerate. For most of us it will take a number of years before we are as recovered as we're going to get. Research suggests that it may take a year or more to simply reestablish daily living patterns. You will never again be the person you were before your loved one died and it takes a long while to find that new way of living. That task takes even longer when the death was sudden and traumatic as your loved one's death probably was.

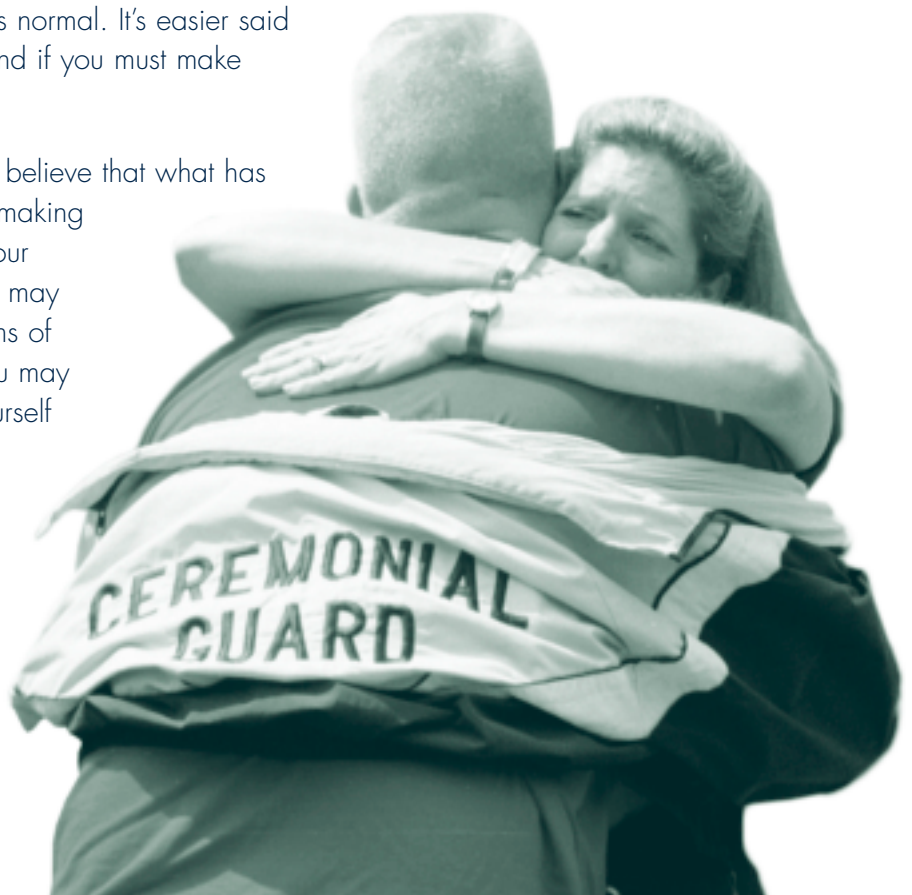
Grief also involves a crazy range of emotions: emotions we didn't even know existed and those we were familiar with, but to a depth and intensity that we never imagined. These emotions are often extreme—all-encompassing rage, bone-chilling horror, bottomless pits of despair. Many of us have found the intensity of these emotions to be more than our friends and family can tolerate and have found some relief in talking to an experienced mental health professional. And these feelings are further complicated by their roller coaster characteristics. It never seems to be one thing for very long before we ricochet off in a completely different direction.

For some, the craziness of grief gets manifested in extremes of behavior. We may find ourselves engaging in frenzied activity, whether cleaning the house, shopping, immersing ourselves in work, or uncharacteristic sexual activity. Using activity as a temporary outlet for intense feelings or as a respite from the wearying tasks of mourning can be healthy. Using it to avoid the pain of grief or engaging in behaviors that are hurtful to self and others is not.

You're not going crazy but grief feels idiotic

The long version is that trauma changes our chemical make-up and brain wave functioning, which in turn impacts everything we do. The short version is grief makes us stupid. It's the rare bereaved person who can't recall several great examples from their own experience. We think crazy thoughts, we do crazy things, we can't concentrate, we can't remember to do even basic tasks, we forget where we're headed before we even get in the car. It's maddening, and there may be some unpleasant consequences (see what happens when you don't pay the bills for a few weeks), but it's normal. It's easier said than done, but try to be patient with yourself and if you must make decisions, talk them over with people you trust.

There may be a part of you that simply cannot believe that what has happened is really true. You may find yourself making up crazy scenarios that "better" explain why your loved one is absent. Your heart and your head may be completely at odds with one another in terms of coming to understand what has happened. You may "see" your loved one in public places, find yourself sniffing their clothes, or believing for a moment that it is them when the phone rings. This is normal too. Your inability to fully embrace what has happened is a reflection of the enormity of your loss, not of your mental health. Don't let anyone try to convince you otherwise.



“It’s almost overwhelming how much, how many different things that TAPS does. But there’s something for everyone. And I think that no matter what you need for support, TAPS has something for every single person.”

*—Carol Lane
(TAPS Mother)*

“It allows men to come forward... The people at TAPS are well-equipped to be able to do that which allows you to grieve and that process begins at that point when you’re willing to release your emotions. And that’s what TAPS has done - and I encourage all men to step forward and be able to participate in that.”

*—Kevin Warrick
(TAPS Widower)*

You’re not going crazy but grief feels outrageous

Your body is going to get in on grieving too. The list of physical reactions common among the bereaved is nearly endless, but science is finally catching up with what most of us have suspected all along: what goes on in our minds and hearts will be reflected by our bodies. Headaches, sleep disturbances of all kinds, muscle tension, rapid heart beat, nausea, aches and pains, compromised immunity, and stomach pain are just a few ways that grief can manifest itself physically. If you already have a medical condition of some kind, you can be sure that grief will impact that too. Stay in touch with your doctor; force yourself if you have to, so that your physical health can be monitored. There’s no point in adding another level of stress to your life if you don’t have to.

The only way to get on the other side of grief is to slog through it. Grief can be postponed but it cannot be dodged, skirted, or gone under or over. And remember, as painful, as crazy-making as grief is, its very intensity is testimony to the power of our love and the significance of our loss. In the words of Dietrich Bonhoeffer:

“Nothing can make up for the absence of someone whom we love, and it would be wrong to try to find a substitute; we must simply hold out and see it through. That sounds very hard at first; but at the same time it is a great consolation, for the gap, as long as it remains unfilled, preserves the bond between us. It is nonsense to say that God fills the gap; God does not fill it, but on the contrary, keeps it empty, and so helps us to keep alive our former communion with each other, even at the cost of pain.”



How We Grieve

You can count on grief to change your life.

Count on grief to increase vulnerability

Human beings are most comfortable when they are in control of their lives and circumstances. Death represents the ultimate “change in plans.” When a loved one dies, our former safety and security no longer seem to exist. Instead, we may experience feelings of helplessness and vulnerability that are frightening, as well as disarming. Yet it is precisely this vulnerability that can break down the walls of resistance to new thought processes and open the way for new perspectives on life in general.

Count on grief to create change

Grieving is a walk through unknown territory. Familiar internal and external stabilities disappear in a whirlwind of changing thoughts, feelings and emotional flux. We are reminded of our pain at odd times and in unexpected ways. Emotions hover near the surface and tears are hard to control. The stress of daily living taxes our protective defenses to the limit. Depression seems to slip in from nowhere and anger erupts without warning. Because grief requires so much emotional energy, our finesse for social game playing is greatly diminished. The bereaved meet the world at a disadvantage, continually surprising themselves and others with unpredictable responses to familiar situations.

Count on grief to change social structure

The bereaved find their social networks changing and transforming around them. Disappointment with family and friends is a common theme. Those we expected to “be there for us” may not be able to meet our needs, while friends we didn’t know we had appear out of nowhere to fill the void. As we come to terms with whatever limitations and expectations we have for ourselves, we also become aware of the limitations of others. Not everyone we care about will receive what they need from us while we are grieving. Not everyone who cares about us will be able to fully share our pain.

Count on grief to define priorities

The bereaved often find themselves realigning their goals and objectives. For most of us, nothing is easily taken for granted after the loss of a loved one. We understand that “now” is the only time there is and that tomorrow may

never come. Relationships are more precious than ever and we are less comfortable with “unfinished business” relating to those we care about. Because the cares and concerns of our busy lives pale in comparison to our loss, the emphasis on people versus things takes on a far greater meaning.

Count on grief to increase spiritual awareness

The pain of grief prompts spiritual investigation into both the known and the unknown. Answers we were sure of before are not always satisfying in the context of our present reality. God is questioned and religion is held up for examination. Typically, there are many stages of distancing, moving toward and moving within old and new spiritual concepts and beliefs. Our struggle for inner peace and unity seizes many priorities. In the majority of cases, our connection to ourselves and the universe becomes far more defined.

Count on grief to strengthen compassion

Grief tears down the boundaries between ourselves and others. Bereavement enhances our humanness and strengthens our ties to the world around us. Our loss is a life-changing event; we will never again be the same people we were before our loved one’s death. Pain somehow opens us to greater levels of awareness and a greater capacity for compassion and understanding. Bereavement provides the catalyst to become more giving, more loving and more fully aware.

Count on grief to define the past and open doors to the future

Following the death of a loved one, the world is completely new. The death often becomes a reference point in which we define where we’ve been and how we structure a path for tomorrow. Grief provides a “crash course” in some of the most profound lessons life has to offer. As bereaved individuals, we find ourselves with fewer answers, but far more insights. In time, we learn there is not loss without gain and no sorrow without joy. As death closes doors behind us, new doors open before us.

By Joannetta Hendel
Bereavement Magazine, January 1990

To TAPS Parents, from a TAPS Father

A dozen times a day you may think you “lost” the 20 years of work and emotion you invested in your son or daughter. We are bombarded with thoughts of futility, of someone’s mistake, of what “should have—would have—could have been.” These thoughts don’t do anything for you but double your pain. But you must forever know there is no futility or shame in the death of one whose living had so much merit. We must never stain his or her merit with negative judgments. And we must never let what they could have been take away any of the glory of what they already were.

Before U.S. Marines Officers School, my daughter went through Parris Island as a private, just to learn the life of the enlisted Marines she would someday be protecting. I realized at the graduation that every private who completed that arduous training, regardless of class rank, had already achieved something amazing, something far beyond the rest of America’s youth.

Everyone who reads this letter has the right to spend each day of their lives showing their pride in their loved one, regardless of the details of the death itself. Because every one of those we love had already risen far above the rest of our society in character, courage, honor and ability. And not an atom of their achievement can ever be lost or taken back. Start exercising your pride. Make a point to hold your chin up in pride for part of every day. Your deceased warrior deserves it. He or she has earned it. If they had lived, they would be proud today of who they are and what they are doing. Now it’s our duty to be proud for them.

With Love and Honor,

Lee D. Vincent

Lee Vincent, proud father of Lara



Companioning

The TAPS Peer Support program is here to offer comfort and care for you, and to everyone who has lost a loved one in the Armed Forces. We do this by taking care of each other. The word “counseling” doesn’t really apply here, so thanks to the good work of our friend Dr. Alan Wolfelt, we have a better word, “Companioning,” to explain how we help each other heal. Here is his definition, explaining how we truly can be a comfort to a friend who is grieving a loss:

- Companioning is about honoring the spirit; it is not about focusing on the intellect.
- Companioning is about curiosity; it is not about expertise.
- Companioning is about learning from others; it is not about teaching them.
- Companioning is about being present to another person’s pain; it is not about taking away or relieving the pain.
- Companioning is about discovering the gifts of sacred silence; it is not about filling every painful moment with talk.
- Companioning is about listening with the heart; it is not about analyzing with the head.
- Companioning is about bearing witness to the struggles of others; it is not about judging or directing those struggles.
- Companioning is about going to the wilderness of the soul with another human being; it is not about thinking you are responsible for finding the way out.

Alan D. Wolfelt, PhD
Center for Loss and Life Transition
Fort Collins, CO
www.centerforloss.com

“So I think TAPS is wonderful because they have support groups here for everybody - from parents to spouses to brothers to sisters - and they help you to get through that, to realize that you’re not alone and to give you advice and tips that you can use to help your children as well. And then my son, being in the camp, he’s just so happy. And it’s sad that he’s here for this reason, but so happy that he has a group that he can feel comfortable in and supported in.”

—Jackie Syverson
(TAPS Widow)





Talking to Children

What does “dead” mean?

Explaining the Language of Death to Children

Those of you who have helped grieving children know how difficult it can be to explain not only what “dead” means, but also all those other new and odd terms we use when we talk about someone who has recently died.

Children overhear us saying, “He committed suicide,” or “She’s being cremated,” or “We need to go to the funeral home to pick out a casket”—not the sort of words on your typical grade school vocabulary test.

When we use these words around children, we owe it to them to explain what we are talking about. If we don’t, the newly bereaved child is more likely to fear what is happening and conjure up scary explanations of his or her own. The child whom we talk over, and not with, will probably also feel left out, and worst of all, alone in his or her grief.

My four rules for explaining the language of death to children:

1. Don’t use euphemisms. For example, saying a dead person is “asleep” will not only mislead a child, but may also cause her to believe that the dead person might “wake up” again. Remember, children can cope with what they know. They cannot cope with what they don’t know.
2. Use simple, concrete language. Young children are very literal. Try not to use abstract or complex words.
3. Don’t over-explain. While children deserve developmentally appropriate explanations about death, they don’t need *War and Peace*. Be brief. Let the child’s natural curiosity, not your need to be understood, guide your discussions.
4. Show them. Children often don’t understand something until they can see it. You will not harm them, for example, by showing them the ashes from a cremation or taking them to the funeral home to look at caskets.

By Alan D. Wolfelt, PhD

Children's Response to Trauma

Children's responses to trauma vary according to the age of the child. Generally, children respond by reverting to behavior typical of an earlier developmental stage. These responses are considered NORMAL if they are of brief (under three weeks) duration. If any of these symptoms continue, there are professionals available to help you with your questions.

AGES 1-6

Bedwetting
Crying
Immobility
Excessive clinging
Thumb sucking
Wetting pants
Loss of bowel control
Fear of darkness
Inattentiveness
Fear of animals
Fear of being left alone
Fear of crowds
Over- or Under-activity
Nightmares
Inability to sleep without a light
or someone else
Awakening during night
Sensitivity to noises
Irritability
Confusion
Speech difficulties
Eating problems
Stomach aches
Accident prone*
Violent fantasies/play
Re-enacting the event
Wanting to die*
Wishing to go to heaven*

AGES 7-11

Bedwetting
Nightmares
Change in sleep patterns
Unwillingness to fall asleep
Need for a nightlight
Fear of sleeping alone
Fear of darkness
Irrational fears
Irritability
Disobedience
Excessive clinging
Headaches
Visual or hearing problems
Refusal to go to school
Poor performance
Fighting
Loss of interest
Loss of concentration
Distractibility
Withdrawal
Refusal to talk about event
Violent fantasies or play
Re-enacting the event
Accident prone*
Appetite disturbances
Over- or Under-activity
Inattentiveness
Wanting to die*

AGES 12-18

Withdrawal and isolation
Headaches
Stomach pains
Running away
Depression and sadness
Suicidal thoughts*
Stealing
Change in sleep patterns
Sleeplessness
School problems
Nightmares
Increased sleep
Confusion
Violent fantasies
Avoiding talking about the event
Delinquent behavior
Use of drugs
Use of alcohol
Sexual acting out
Accident prone*
Relationship difficulties
Change in appetite
Aggressiveness
Risk taking behavior*
Over- or Under-activity
Irritability
Inattentiveness

**Any suicidal talk or actions should be taken seriously and professional help should be sought immediately. Younger children do not understand the permanence of death, so do not understand the consequences of "suicidal" behavior. Even very young children can become suicidal.*

Informational handout created by Trauma Management Consultants, Arvada, CO, Nancy Rich, MA, 1991

*Remember, TAPS is here for you,
as a companion on this journey.*



Stephan

Stephan Acevedo
Ft. Belvoir, VA



T * A * P * S
GOOD GRIEF CAMP
FOR YOUNG SURVIVORS

In my 20 years of service in the U.S. military, I have met thousands of family members who have been the backbone and steel rods of the support structure for the men and women who serve this country. But what happens if their loved one is killed? That is where TAPS becomes invaluable. The TAPS caseworkers are skilled and knowledgeable regarding the benefits and resources available for families in federal, state and private agencies. While these resources are important, sometimes a family member just needs someone to talk to about their loss as part of the grieving process. Here TAPS provides a unique “companioning” program that provides access to peer mentors—their sole credential being that they share the tragedy of losing a loved one in the armed forces.”

—LTC Scott Rutter
National Spokesman for the
Tragedy Assistance Program for Survivors, Inc. (TAPS)



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